California Energy Commission Transportation Fuels Office MS 23 1516 9th Street Sacramento, CA 95814 Ph. 916-654-4868 Fax 916-654-4753

## California Retail Fuel Outlet Survey Annual Report CEC Form A15 (rev. 8/19/05)



E-mail: piira@energy.state.ca.us Report Year: **Facility Name:** Brand Name (If Applicable): Physical Address Street Number and Name: Zip Code: **Normal Hours of Operation:** Telephone Number: Sales **Tank Information Facility Information** Product Number of Capacity Number of Capacity (000's Volume ('000 **AGTs** (000's Gals) **USTs Product (See Definitions)** Code Gals) Gallons) Ownership Designation (Check One) CARB RFG -- Regular 185 Company Owned & Operated CARB RFG -- Midgrade 186 Company Owned - Dealer Operated 187 CARB RFG -- Premium Dealer Owned & Operated 477 Independently Owned & Operated CARB Diesel ≤500 ppm Sulfur CARB ULS Diesel ≤15 ppm Sulfur 478 486 Marine Fuels Operational Designation (Check One) Bio-Diesel - B5 487 Service Station Bio-Diesel - B20 488 Cardlock Facility Bio-Diesel - B100 489 Hypermart Finished Aviation Gasoline, Leaded 115 Marina 116 Finished Aviation Gasoline, Unleaded Airport Commercial Jet Fuel 217 Truck Stop Propane, Consumer Grade 624 Other E-85 117 **Business Amenity Information (Check** M-85 118 Each That Apply) 119 Convenience Store M-100 Compressed Natural Gas 120 Kiosk 121 Restaurant/Fast Food Outlet iquefied Natural Gas Other, Specify Supermarket/General Store Pharmacy Discount Store Automotive Repair Service Bay This report contains proprietary and trade secret information and is customarily treated as confidential by this company. The disclosure of this information would result in competitive hardship. Therefore, pursuant to Public Resources Code sections 25213, 25218(e), 25364 and Title 20, California Code of Regulations, section 1370 our company is requesting that all information submitted on this form be kept confidential. I certify under penalty of perjury that the information contain in this Report is true, correct and complete to the best of my knowledge. I am authorized to make this report on behalf of my company. Name, Title & email address Telephone Number Signature Date Filed